

*With respects to
Bedford (G. S.)*

NEW YORK UNIVERSITY—DEPARTMENT OF MEDICINE.

AN

INTRODUCTORY LECTURE,

DELIVERED BY

GUNNING S. BEDFORD, A. M. M. D.

Professor of Midwifery and the diseases of Women and Children, in the
New York University.

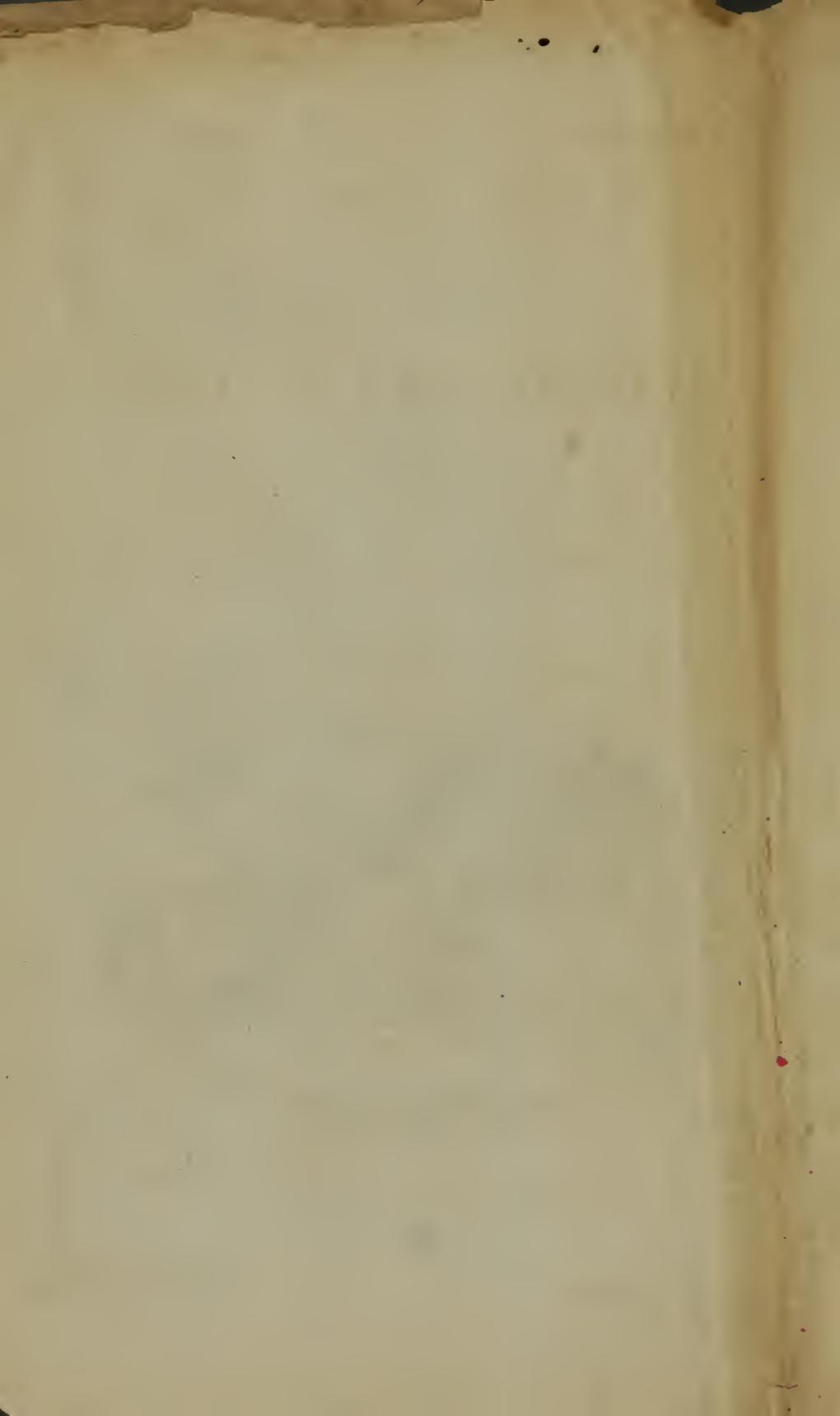
SESSION MDCCCXLV—XLVI.



NEW YORK:

PRINTED FOR THE MEDICAL CLASS OF THE UNIVERSITY, AT THE
HERALD JOB OFFICE, 97 NASSAU-STREET.

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NEW YORK, NOVEMBER, 3d., 1845.

PROF. BEDFORD:

Dear Sir:—At a meeting of the Students of the University Medical College, held on Saturday last, Mr. C. T. QUINTARD, of Connecticut, in the chair, and Mr. A. B. McWHORTER, Jr. of Alabama, acting as Secretary, it was unanimously

Resolved, That a Committee be appointed to address a letter to you, requesting for publication a copy of your able and eloquent Introductory Address, delivered on Saturday last.

The undersigned Committee being appointed to perform a duty so gratifying, most respectfully add their solicitations to those of the Class, and trust you will not refuse so unanimous a request.

With great respect, we are yours,

T. R. VARICK, *New York*.
AUGUSTUS C. BOORAEM, *New Jersey*.
HENRY N. WHITTELSEY, *Connecticut*.
PETER C. HAIRSTON, *Virginia*.
H. HOLLISTER, *Pennsylvania*.
J. W. ALBURY, *West Indies*.
S. RANDALL, *Alabama*.
JNO. M. KITCHEN, *Ohio*.
JAMES D. SMITH, *Georgia*.
W. H. WILBURN, *Massachusetts*.
J. L. COLBY, *New Hampshire*.
J. P. GARVIN, *Tennessee*.
CHAS. CUMMINS, *Ireland*.
WM. SPARROW, *North Carolina*.
MOSES FIFIELD, *Rhode Island*.
A. H. COOK, *Canada*.
C. REED, *South Carolina*.
ROBT. H. CLARK, *Delaware*.
H. M. ANDERSON, *Maryland*.
MAURICE B. BROWN, *Indiana*.
A. C. WELLS, *Michigan*.
GEORGE WELFORD, *Arkansas*.
DIEGO DE ALVEAR, *Spain*.
ALEXANDER McDONALD, *Nova Scotia*.
TRUEMAN H. ROSE, *Vermont*.
S. D. CAMPBELL, *Mississippi*.
E. ELLIS, *Maine*.
JAMES F. SEGUIN, *Louisiana*.
J. R. WELLS, *Missouri*.

NEW YORK, NOVEMBER 5th., 1845.

Gentlemen.—I beg leave to acknowledge the receipt of your kind letter of 3d instant, requesting, in behalf of the Class, a copy of my Introductory Lecture for publication. Although not written for the public eye, yet I do not feel that I have a right to withhold it, when, as you inform me, the united voice of the Class desires its publication. For this mark of confidence and favor, you will please accept my warmest thanks, and believe that I will faithfully labor, during the present session, to discharge my duty to you and your fellow students. Allow me to congratulate you on the continued prosperity of the University; and with the assurance that I feel a deep interest in all that concerns the general good of the Class, I have the pleasure to subscribe myself.

Very truly your friend.

G. S. BEDFORD.

MR. C. T. QUINTARD,
and Committee.

LECTURE.

GENTLEMEN:—It is, indeed, gratifying, in looking around this hall, to behold, amidst numerous new faces, the countenances of former and assiduous pupils, who, having tested the value of the instruction imparted in this Institution, have returned to renew their labours, and receive the highest honors, which the University can pay to their zeal and devotion. I therefore, most cordially greet you, and while I bid you welcome, suffer me to congratulate you on your safe arrival in the metropolis of your country. During your absence, we have not been unmindful of your interests nor have we permitted to pass from our memory the evidences you exhibited, during the past session, of assiduity in the profession of your choice. That you may continue to furnish those evidences of industry and attention, and that your future career may, in fruits and in happiness, be proportioned to your respective merits, no one, believe me, more ardently desires than he who now addresses you. You have visited the city of New York in search of knowledge, which may hereafter extend your usefulness among your fellow men, and render you a blessing to those to whom, after you shall have entered on the mission of practical duty, it will become your province to dispense the benefits of the healing art. You have now arrived at the most important and interesting period of life. You are anxiously engaged in laying the foundation of future character and eminence—and, under circumstances like those in which you are placed, it is manifest that you have your hopes and fears—that, at one time, the best impulses of your nature cause you to exult in the prospect before you, contemplating only a bright and glorious future; while, again, doubt and anxiety crush in your breasts the spirit of hope, and generate feelings of despondency and distrust. Allow me thus early to assure you—and I do so in friendship and in truth—that on your own efforts, more than on any other circumstance, will depend your future success. No man ever attained lasting eminence in the medical profession, who did not owe much to his own persevering industry; it matters not how he may be surrounded by adventitious influences—in the conflict of mind with mind, wealth can have but little sway—and the pomp and pageantry of artificial life wane into insignificance before

the lights of genius and knowledge. Take courage then, and remember that you live in an age, and in a country too, that recognizes no superior to knowledge, and estimates mind as the richest legacy that man can bequeath to man. If you wish for illustrations of what I now tell you, they are to be found among the good and wise in divinity, in medicine, in law, and in commerce. The church embraces within her pale many gifted men, who have adorned, and shed a lustre around her, and who might have languished and died in obscurity, had it not been that a just tribute was paid to their talents and persevering efforts in the cause of science and letters. So, too, has it been with the profession of medicine. Look to her annals; read the history of her great men; of those master spirits, who have done so much to honor and enrich the noble science you are now pursuing, and you will find examples worthy of imitation—you will have exhibited to your view lessons of encouragement in the moment of trial, and models, which, whilst they are calculated to elicit your admiration, will serve, in the dark hour of adversity, as beacon lights to guide you on to brilliant achievements. I could, if it were deemed necessary, array before you the names of many illustrious men in our profession, who commenced life in poverty, and pursued their studies under circumstances the most disheartening, and who, by the force of talent and untiring industry, have reached the highest position ever awarded to genius and honest effort. There is not an individual among you, no matter how cheerless the prospect before him may at present appear, who may not, if he pursue an onward course, attain the just honors of the profession, and appropriate to himself fame and fortune equal to his most ardent wishes. The avenue to distinction is open to all, and success awaits the industrious and devoted student.

In this Institution you are to learn the elements of your profession; here it is that you are to lay the basis on which is to be erected the superstructure of your future fame. The various departments of Medicine and Surgery are embraced in our curriculum of instruction; and I am quite confident that my colleagues will afford you every facility of becoming practically acquainted with the details of their respective chairs. To me is confided a branch of instruction, which, in my humble judgment, is second in importance to no other in this University. The chair of Obstetric Medicine includes the subject of *Midwifery proper*, the *diseases of women and children*, and the various legal questions connected with pregnancy and child-birth.

Attempts, I am aware, have been made to deprecate the study of obstetric science as a link in the chain of medical pursuits; and essays

have been written with a view to prove that, as parturition is a natural process, it does not need artificial interference for its consummation. Indeed, it has been contended that because animals bring forth their young with comparative ease, it is manifest that woman, during the perils of child-birth, does not require the aid of the physician, but on the contrary should be committed entirely to the conservative powers of nature. This opinion—sustained with far more vehemence than truth of argument—has been productive of the most melancholy fatality; and where it has not resulted in actual death, it has entailed on the credulous the severest disease and suffering. It is my duty, Gentlemen, to guard you against the erroneous views of those, who would wish to impress you with the belief that the act of parturition in the human female and in the brute creation is strictly analogous. There is between the two a marked difference; and the distinction is founded not on hypothesis, but on the best possible basis—anatomical structure.

The fact cannot be denied that comparative parturition is a process at once easy and simple; nor is it characterised by that intense suffering which is the constant attendant of *child-birth* in the human species. The penalty of sin, and the irrevocable curse pronounced on our first parent—“*in sorrow shalt thou bring forth thy children,*” was meant to be perpetuated through all time; and God, in his infinite wisdom, has so regulated the structure of the human frame as to render certain the fulfilment of his decree—he has interposed a physical barrier over which the best efforts of man can have no control; and in this, as in his other works, he has exemplified his own surpassing power.

Let us, for a moment, consider the position and configuration of the pelvis in the human female. It is situated at the base of the trunk, and, in the erect attitude, is oblique to the horizon. A line, therefore, drawn from the vertex and extending perpendicularly downward in the direction of the trunk, instead of passing through the centre of the superior strait of the pelvis, will strike the upper portion of the symphysis pubis. Again, the direction of the lower aperture of the pelvis is such as to form with the upper nearly an acute angle. The sacrum and coxeyx, instead of being on a line with the spinal column, are curved inward, and this disposition of these two bones throws the vagina forward, its axis thus forming with the axis of the pelvis almost a right angle. We thus find that the pelvis in the human female is literally a *crooked canal*; and this peculiar conformation, whilst it is designed to answer most important ends, especially during the period of pregnancy, has necessarily rendered *child-birth* a tedious and painful process.

With the same benevolent view, to protect from injury the gravid uterus, nature has so adapted the volume and form of the child's head

to the capacity of the superior aperture of the pelvis, as to render it physically impossible for it to enter the excavation by its own weight. It requires, on the contrary, the expulsive efforts of the uterus to ensure its progress through the canal; and, in its passage, the head is made to undergo certain movements before it can be delivered.

But for this conformation of the pelvis, and the adaptation of the fœtus to it, the female would have been exposed, from the constant operation of gravity, to the hazard of premature delivery; and thus, one of the great ends of nature—the birth and increase of mankind—would have been seriously affected. It must, however, not be forgotten, that this very immunity from danger has been purchased at the expense of severe anguish and suffering—carrying out, to the fullest extent, the decree of heaven—“*in sorrow shalt thou bring forth thy children.*”

Now, if we compare the peculiarities of the quadruped with those of the human subject as just described, we shall at once perceive the absurdity of claiming a strict analogy between human and comparative parturition. In the quadruped, in consequence of the horizontal position of the body, the gravid uterus, during the whole period of gestation, is sustained by the abdominal walls, whilst the pelvis and other organs immediately concerned in labor are not in any way exposed to the influence of gravity. It, therefore, follows that the same mechanism is not required in these parts that is found to be so indispensable in the human subject. The pelvis, instead of being a *crooked canal*, has but one axis, and this corresponds with the general axis of the body, vagina, and os externum. The head of the fœtus, too, being relatively smaller than the pelvis, can traverse the latter in any position without being subjected to the same movements so important for the head of the human fœtus to undergo during its passage through the maternal bones.

From this brief outline you will perceive an essential difference in the physical organization of those parts directly concerned in the interesting process of reproduction, as exhibited in the human subject and animals; and the fact is readily explained why it is that, in the one case there should be so much anguish and peril, whilst in the other the whole act of parturition is characterised by great facility and comparative freedom from pain. The objections, therefore, of the writers to whom I have alluded, are not only untenable, but they betray a lamentable ignorance of truths with which, it should be presumed, every medical scholar is familiar. Again, the human female is liable to pelvic deformities from rickets and other causes

and when these deformities exist, they require all the skill of the accoucheur, and the maturest judgment to rescue from impending danger the lives of both mother and child. And yet! how often does it happen that, under such circumstances, one of these, either mother or child, is sacrificed from necessity, which science itself cannot check.

It assuredly, however, cannot be necessary to pursue the argument for the purpose of convincing you that the department of obstetric medicine constitutes a most important branch of your medical studies; and that a sacred obligation rests on you to avail yourselves of every opportunity of becoming thoroughly acquainted with its principles and practice. In order that you may be qualified to conduct, with safety to your patients and honor to yourselves, a case of difficult labor, your minds must be imbued with the principles on which rests the mechanism of parturition; you must be made to feel and appreciate this important truth—that if you wish to aid nature, when circumvented by difficulty and embarrassment, you must first take nature as your model, and understand the course she pursues when unencumbered by accident. In this way only can you effectively become her substitute, and exhibit the advantages of science over ignorance, of skill over empiricism.

Many of you, no doubt, are destined to practice your profession in sections of country remote from the facilities incident to a populous city, and where the opportunities of counsel will be entirely beyond your reach. Under such circumstances, you will be constrained to rely on your own resources; and, on the positive knowledge you may possess of this department will depend the happiness and safety of those who are hereafter to be confided to your care. The full extent of the responsibility you will be called upon to assume as practitioners of midwifery, you will not be enabled to appreciate until you shall have left these halls, and commenced the mission of active duty; and remember, that he who enters on the practical business of his profession with an accurate knowledge of all the details of obstetric medicine, will soon lay the corner-stone of his fame and fortune.

In order that you may have a clear and comprehensive view of the triumph of skill at the bed-side of the parturient woman, allow me to present to your consideration a case, which may occur to any of you, after you shall have embarked in the practice of your profession. We will suppose a female to be taken in labor—the physician is sent for—he arrives, and, on examination, finds his patient affected with labor pains, the head of the child presenting at the superior strait. For the

first twenty hours, the labor proceeds with ordinary regularity, and nothing occurs worthy of note. The medical attendant finds that the head has left the upper strait, and descended into the pelvic cavity; the pains increase in violence, but no further progress is made in the delivery. The patient suffers severely from the successive but unavailing efforts of nature to expel the child; she finally becomes exhausted—the friends exhibit evidences of alarm—the doctor is appealed to—he assures them all is right, and that in a short time the delivery will be terminated. But alas! these predictions are not fulfilled—the patient's situation becomes still more imminent, and the practitioner resolves, without any reference to the actual cause of the delay, to extract the child. He accordingly applies the forceps, but ignorant of the mechanism by which the foetal head traverses the maternal pelvis, vain indeed will be his efforts to move the head from the position it occupies. He now finds that the forceps cannot diminish the excess of diameter as it exists between the head of the fœtus and pelvis of the mother; and, as a last resort, touched by the melancholy situation of the woman, who has confided her life to his judgment, he resolves to mutilate the child. The result of this heroic achievement the mother is soon made conscious of—she gazes on the mangled body of her infant, and returns heart-felt thanks to its destroyer, believing as she does that to his consummate skill she is indebted for the preservation of her own life! Now, gentlemen, turn from this scene of carnage—for it is nothing else—and observe the conduct of the accoucheur, who comprehends perfectly the principles of his art, and proceeds on the true basis of knowledge. He dispenses with the horrid butchery which characterized the other—he saves the lives of both mother and child—he converts a house of sorrow into one of joy. He restores to the heart-stricken husband the idol of his affections; and, after this faithful discharge of duty, retires amidst the benedictions of friends, in which the empiric or pretender never can participate! The skilful accoucheur, as soon as he institutes an examination, ascertains that the movement of rotation has not been effected, and that the head is situated diagonally in the pelvis. Aware, from his knowledge of the pelvis and the correspondence of its diameters with those of the foetal head, that delivery cannot be accomplished without subjecting to severe hazard the life of one or of both individuals, he changes in the first place, either with the hand or forceps, the direction of the occipito-frontal diameter of the cranium, so as to make it accord with the coccyx-pubic diameter of the pelvis, and then waits with confidence for nature to achieve the delivery. Should he, however, find from the alarming condition of his patient,

immediate delivery indicated, he proceeds at once, after correcting the mal-position of the head, to extract the foetus, which is accomplished without injury either to mother or child. Such results constitute the brilliant triumphs of the obstetric art—and they should awaken in you an earnest desire thoroughly to comprehend this department of your medical studies.

Allow me, in the most solemn and emphatic manner, to caution you against an error which unfortunately for suffering humanity and the honor of our profession, has too generally prevailed. I allude to the indiscriminate and unpardonable use of instruments in the practice of midwifery. That they are resorted to in this city most unjustifiably, and with results the most disastrous, I know to be a fact. If the grave could speak, how fearful would be its revelations on this topic, how monstrous the guilt of those who revel in innocent blood! Not more than six weeks since, I was visited by a medical gentleman, who had been in practice but a short period; in the course of conversation, the subject of operative midwifery was introduced; and he observed to me that he had enjoyed the best opportunities of becoming familiar with the use of instruments, for his preceptor had performed the operation of embryotomy on an average sixteen times a year!!! To you, Gentlemen, an announcement of this character may appear like romance—but I have myself witnessed in this city scenes of blood sufficient to satisfy my mind that this is not an exaggerated picture; and I will take the liberty of citing one case, among several others now fresh in my memory, to show you that I do not speak without cause, when I protest against the unholy acts of men, who were intended neither by Heaven nor Nature, to assume the sacred duties of the lying-in chamber.

About two years since, I was requested to visit a poor woman, who resided a few miles from this city. She had previously borne two living children, and her confinements had not been attended with any unusual circumstance. On arriving at the house, there was presented to my view a scene, which I can never efface from my memory. It was a spectacle at which the heart sickened—it was humiliating to my professional pride, and I could not but experience feelings of deep mortification. This unfortunate sufferer had been in labour twenty-six hours, when two medical gentlemen, for reasons which I trust were satisfactory to themselves and their consciences, determined on the use of the perforator. This instrument of death was accordingly thrust into the brain of a living child; the labor, however, did not advance, and they proceeded to remove the foetus piece-meal. After four hours' desperate toil—and I ask, where could have been their feelings of humanity

—they succeeded in bringing away the entire fœtus in a mangled condition, with the exception of the head, which was still in the womb. The friends of this poor creature—for destitute as she was, she was not without friends in this, her time of trial—her friends, I repeat, became alarmed; their confidence was lost, and the serious apprehensions entertained for the safety of the woman induced them to call in additional aid. I was sent for; and, on hearing the particulars of the case as far as the messenger could communicate them, I hastened to the house, accompanied by my former pupils, Drs. Busteed, and Burtsell.—The patient was pale and exhausted; her countenance was that of a dying woman; she was almost pulseless, with cold extremities, and the perspiration of death on her. In her death agony, she supplicated me to save her, and said, with a feeling that none but a mother can cherish, that she was willing to undergo any additional suffering, if she could only be spared to her children! Poor creature! her measure of anguish was indeed full, and had she known that she was about being removed from her children by the atrocious butchery of men, to whom she had entrusted her life, she would not have made the appeal she did. In approaching the bed of the dying woman, and on attempting to make a vaginal examination to ascertain the condition of the womb—the head of the fœtus being still in its cavity, having been separated from the trunk—you may well imagine my feelings on finding a mass of small intestines protruding from the vagina, and lying between the thighs! The operators had not contented themselves with slaughtering the infant; but they ruptured the uterus, through which the intestines had escaped; and, in this condition, they had abandoned the woman! She lay in this situation three hours before I saw her, the Doctors having left the house, stating that nothing more could be done!! Verily, death *does* terminate all human effort.

The question may now be asked—why was embryotomy had recourse to in this case? I never could ascertain. There must have been some secret reason for it; the burning love, perhaps, which some men have for the eclat of *bloody deeds*. There was no deformity of the pelvis; the head of the fœtus was of the usual size, and, as far as I could learn, it was an ordinary labor. The doctors judged it advisable to do something, and they decided to turn and deliver by the feet. They accordingly proceeded, and, mistaking a hand for a foot, pulled it into the vagina. They were then foiled, and, in order to complete the delivery, they commenced cutting up the fœtus, and extracting it piece-meal. Thus were two lives wantonly sacrificed. The patient died in about two hours after I arrived; and half an hour before she sunk, she ob-

served, “*My poor child was alive; for I felt it move when the doctors were tearing it from me.*” Such language, uttered under such circumstances, was indeed graphic and eloquent in condemnation of those who had been participants in this most cruel tragedy.*

Be not deceived, gentlemen, by supposing that the child, while in its mother’s womb, enjoys only an inferior life, and that, therefore, its destruction is a matter of secondary consideration. Ask the physiologist, and he will tell you that although its existence is a dependent one, yet the human foetus possesses all the attributes of life, and has an inherent vitality during the earliest periods of conception. Ask the moralist, and he will tell you that the foetus is a living being in the broadest acceptance of the term, and that the unjustifiable taking of its life is, in the eye of Heaven, *murder*. I am not ignorant that a man, under the privileges conferred by his *diploma*, may recklessly, and with impunity, so far as human law is concerned, sacrifice life in the manner I have just described to you; but if truth be not a fiction there will come a day of fearful retribution.

I would not have you believe, from the remarks I have made, that you are, under no circumstances, to have recourse to instruments in the practice of midwifery. On the contrary, I shall endeavor to demonstrate to you, in the course of the ensuing session of lectures, that the proper and legitimate application of instruments will often be the only means left of preserving life. It is against their criminal employment only that I protest.

It will be my anxious care to point out to you the mechanism by which the entire delivery of the child and its appendages is accomplished, and it will be shown that the passage of the foetus through the pelvis of the mother is effected on principles purely physical. You will find it difficult to contemplate this beautiful mechanism, and observe the wise provisions for its proper consummation, without referring at once to an Almighty hand a work as full of benevolence as it is of perfection.

Remember, however, that the duties of the accoucheur do not terminate with the delivery of the child; and fortunate would it be for the parturient woman if this doctrine were more generally inculcated. The opinion that the perils of the lying-in chamber cease with the birth of the foetus is not only preposterous, but is fraught with danger both to the practitioner and patient. The management of the placenta constitutes, in itself, one of the nicest and most interesting points connected

* The particulars of this case I have mentioned in my edition of Chailley’s Midwifery.

with the whole practice of midwifery. Tell me not that the delivery of the child emancipates the woman from all further peril. Truly has it been remarked, by a most emphatic and lucid author, that no man should have the hardihood to cross the threshold of the lying-in room who is not prepared, promptly and effectively, to conduct every placenta case that may by any possibility present itself. I respond most heartily, with all consciousness of its truth, to the value of this sentiment; and I would say to those, who have never yet been engaged in the practice of the profession, that if there be any one thing more than another, in the whole routine of professional duty, calculated to strike terror into the heart of the practitioner, and for a moment paralyse his best energies, it is a case of *flooding* after the birth of the child. Here there is no time for consultation—no time for reference to authority—one moment's hesitation or doubt on the part of the practitioner, and death speedily terminates the scene. Nature has opened her *flood-gates*, and if they be not instantly and skillfully closed, all chance of rescue is at an end. A short time since, I was sent for in great haste by a medical gentleman to meet him in consultation in the case of a lady then under his professional charge. As soon as I reached the house, he informed me that half an hour before my arrival he had delivered his patient of a fine son; and he observed that there was another foetus in the womb. Finding his patient growing weak, he thought it advisable to send for assistance. This was all the information I received, when, on being introduced into the room, I witnessed a scene which I have not language to describe. The husband and relatives were gathered around the bed of the dying woman; her two little children, who had been asleep in an adjoining room, awakened by the confusion of the night, became alarmed, and rushed into their mother's chamber. As soon as I beheld the patient, I became convinced that all was over. There she lay, pulseless and speechless, with death written on her countenance. In placing my hand on the abdomen, I found it immensely distended; it was soft on pressure, and in an instant I arrived at my diagnosis. It was *internal uterine hemorrhage*. Utterly hopeless as the case was, I could not stand passively by and behold the last flickering of the vital spark, without one desperate effort to reanimate exhausted nature. Without a moment's delay, therefore, I introduced my hand for the purpose, if possible, of bringing on contraction of the womb. I found the placenta detached, and lying immediately over the mouth of the uterus, thus effectually preventing the escape of blood externally, and leading the practitioner to a fatal error as to the actual condition of his patient. As soon as I had introduced my hand into the womb, the

unfortunate lady seemed to experience a momentary revival; she opened her eyes wildly, gazed on those around, asked for her children, and instantly expired! Comment here can scarcely be necessary. Error of judgment, as to the nature of the difficulty, had thus suddenly swept from earth an interesting woman, and had deprived the young and helpless of a mother's love and devotion. Such scenes are, indeed, agonising, and are calculated to make a lasting impression on the minds of all, who appreciate the necessity of accurate knowledge and the fulness of professional responsibility.

The management of the after-birth not only involves the immediate safety of the female, but it frequently entails much future suffering and disease. A common, and occasionally a very formidable malady incident to the female sex—I mean *falling of the womb*—is, I am sure, in many instances, directly traceable to the indiscreet and hurried efforts of the accoucheur to extract the placental mass. The child is delivered; and, not content to wait the proper time for the uterus to throw off the after-birth, the medical attendant proceeds to remove it by forcible tractions. If these tractions do not result in hemorrhage, they often induce mal-position of the womb, thus giving rise to a multitude of painful annoyances, which often terminate in serious, if not fatal, derangement of the uterine functions. I shall dwell, during the session, with emphasis on this subject, and shall call your attention, in an especial manner, to the rule of conduct to be pursued in all cases of difficulty, connected with the delivery of the placenta.

Many whom I am now addressing are aware that prejudice, and a mistaken feeling of delicacy have, in certain sections of this country, induced intelligent women to commit themselves, during the perils of child-birth, to the entire government of ignorant *midwives*. In the South, more particularly, this custom has prevailed to an alarming extent. And, gentlemen, I now speak as a southern man—as one who was born and educated under her genial sun, and whose love for her soil and her institutions has in no respect abated. I, therefore, feel that I have a right to speak on this subject, and would that my admonitions might tend to do away with a custom, which is not only full of peril, but which daily leads to the most distressing results. What are the claims of an ignorant *midwife*, who cannot distinguish the *os sacrum* from the jaw bone of an ass—who cannot tell you whether the womb is in the stomach or in the pelvis—who is so ignorant of the very first principles of the science, that she does not know whether she is pulling on the after-birth or a prolapsed uterus—what, I ask you, are the claims of such a creature, that the fond and devoted object of your

heart should be committed to her charge during the most anxious and trying moment of her existence? After you shall have completed your medical studies, and received the diploma of this University, and when you return to your homes to enter upon the details of practice, let me entreat you to exert your influence in your respective spheres to point out the dangers of the practice to which I have alluded, and protect from harm those who not only have a natural claim on our sympathies, but to serve whom is always a pleasure to every right-thinking man.

I have now called your attention to one branch only of the department, which is committed to my care in this institution; and the very rapid sketch that I have presented of certain points connected with *Midwifery proper*, will, I trust, suffice to demonstrate that I have some reason for insisting on the interest and importance of the topics connected with my chair. I will labor most assiduously to instruct you in all the details of this subject, and if I should fail in compassing the object, it will not be for the want of proper effort on my part. I will devote all the energies of my mind, and consecrate most faithfully to your service all the means that I can bring to bear, which can in any way enable me to facilitate your knowledge of obstetric medicine.

You must, however, remember that there are other divisions of this science to which I have not yet referred—divisions, which, from their great importance, will demand a large share of our attention. I allude to the diseases of women and children. With the subject of midwifery these topics are in close alliance, and they constitute a most interesting part of the science of obstetric medicine. Allow me to urge on you the necessity of close attention to these diseases; your success as practitioners will be much enhanced by a proper knowledge of them; for of all the maladies for which your counsel will be invoked, none will have a stronger claim on your sympathies—none will secure you a richer reward for your services, provided you thoroughly understand their nature and treatment, than the diseases peculiar to females. The melancholy ravages of uterine disorder in this country, and the general ignorance which has prevailed with regard to its true and varied character, are circumstances well calculated to call forth the earnest attention of every pupil, who has at heart the welfare of humanity, and the honor of his profession. Some of the best minds in Europe have been busily engaged during the last few years in the investigation of these important maladies, and they are fully entitled to the elaborate research bestowed on them. The female, to the professional man, is an object of deep interest from her infancy to the completion of her existence. If she escape the dangers of early life

and pass on to the age of puberty, she becomes, as it were, a new being, subject to new influences, and exposed to all the perils of incipient womanhood. The womb, before inactive, participating in no way in the general plan of the economy, is now brought into its proper relations with the rest of the system ; if nature be not opposed in her purpose, she gradually develops the sensibilities of the uterus, and thus the important, and I might add, the controlling function of menstruation is established, changing the whole physical and moral character of the girl, admonishing her that she is no longer a child, but transformed into a woman, on whom important and sacred duties are soon to devolve. The period of puberty is surrounded by difficulties frequently of the most complicated character ; and it will often require all the vigilance and skill of the well educated physician to rescue the young sufferer from the perils attendant upon her advent into womanhood. It will be my duty to point out to you an important connection between disordered menstrual function at the period of puberty, and pulmonary derangement—the latter often leading to fatal results—simply because instead of being regarded merely as a symptom of uterine disorder, is treated as a primary or original disease.

I have already adverted to the condition of the female during the period of child-bearing, and having fulfilled these duties she then passes to what is termed the critical age of female life, liable to a different order of maladies, and again requiring the circumspection of the medical attendant. These various eras of female existence, together with their respective and accompanying derangements, will be most fully arrayed before you ; and I shall spare no effort to bring your minds to a just estimate of the sacred responsibilities connected with the treatment of these maladies.

In conclusion, gentlemen, allow me to congratulate you and the friends of this institution on the brilliant prospects of the present session. Our previous efforts have, indeed, been attended by results, not only far surpassing our most sanguine hopes, but which, I believe, are unexampled in the history of medical schools. When I survey this Hall, and see the multitude of students who have assembled thus early in the season, giving us their confidence and support, I cannot but rejoice, and feel that my colleagues and myself have cause to be proud of this noble response to our efforts in the cause of medical education. We are but in our infancy—this University from its very commencement aimed high. It was not brought into being without encountering the difficulties incident to all new enterprises ; and although this is but the fifth session since its opening, I am happy to state to you, on authority that

cannot be questioned, that we are this night, in the language of the sporting circles, neck and neck with the oldest medical school of the land. Success, however, must not make us indolent; if we have labored to give character and position to this school; if our time and all our energies have been devoted to the attainment of this object, we shall likewise have to toil in order to maintain the ascendancy, which we now enjoy. We must not prove laggard in the race; nor will we suffer one solitary leaf to be plucked from the wreath of honor, which now decorates this institution. From you we shall expect corresponding efforts—you, gentlemen, are to constitute the fruits of all our labor—your future character as medical men, and your success in life, will be the exponents of the character and success of your *Alma Mater*. I have no fear of the result—already have our alumni taken an honorable stand in the field of competition—already have we heard of their renown; and it is with feelings of pleasure and exultation that I state to you that facts are in the possession of some members of the faculty, showing, that where the chances were unequal, the graduates of this school have not only maintained their ground, but, in several instances, have succeeded in obtaining the prize of public favor and confidence over older and more experienced rivals. God speed them and you! The time, I believe, is not far distant when this University, passing her eye over this extended country, and witnessing the brilliant achievements of her sons—seeing their acts and their names recorded among those who have done honor to their profession, will exclaim, with all the warmth that animated the breast of the Roman mother,—“*These are my jewels.*”

